

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		12/09/94
FEE DETERMINATION			12-17-99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		39158	1-12-2000
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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